									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 9, 69, 69, 69													49	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	. EN	ITIITY □	OR	OTHER SMALL		
TOTAL CLAIMS			20.					RATI	E	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=					X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			4 minus 3 =		•			X40=			OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=			OR	+270=		
• 11	the difference	in column 1 is	less than zero, enter "0" in column 2				1	TOTAL			OR	TOTAL		
CLAIMS AS AMENDED - PART II									,		•	OTHER		
	, . : :		(Colu				SMAI	LL ENTITY		OR	SMALL ENTITY			
AMENDMENT A		REMAINING AFTER PR		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	. 18.	Minus	4	21)	8		X\$ 9	=	•	OR	X\$18=		
ME	Independent	.13	Minus	•::24	,	= :		X40=	_		OR	X80=	,	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							405		ć		- 070		
1	OUB RCE							+135			OR	+270= TOTAL		
3								ADDIT. F			OR	ADDIT. FEE	•	
_		(Column 1)			mn 2) HEST	(Column 3)				4551	ا - ۱۰۰		•	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM	MBER OUSLY FOR	PRESENT EXTRA		RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. /8	Minus;	** 0	10	=	Н	X\$ 9	=		OR	X\$18=		
AME	Independent	• 3	Minus	***	4	-		X40=	=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								=		OR	+270=		
									AL		OR	TOTAL ADDIT. FEE		
			addit. F				A0011.1 EE							
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IMN 2) HEST ABER HOUSLY FOR	PRESENT EXTRA		RATI	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON NO	Total	•	Minus	••		=		X\$ 9	_		OR	X\$18=		
ME	Independent	•	Minus	***		-		X40=	_		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										1			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE											OR	ADDIT. FEE	<u>L</u>	
		nber Previously Pa					er fo	und in the	e ap	propriate bo	x in co	olumn 1.		